

**FORM 8**  
**DELIVERIES AND INFANTS SERVED BY TITLE V**  
**AND ENTITLED TO BENEFITS UNDER TITLE XIX**  
**(By Race and Ethnicity)**  
*[Sec. 506(a)(2)(C-D)]*

Reporting Year: \_\_\_\_\_

**I. UNDUPLICATED COUNT BY RACE**

	(A) TOTAL ALL RACES	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More Than One Race Reported	(H) Other & Unknown
TOTAL DELIVERIES IN STATE								
TITLE V SERVED								
ELIGIBLE FOR TITLE XIX								
TOTAL INFANTS IN STATE								
TITLE V SERVED								
ELIGIBLE FOR TITLE XIX								

**II. UNDUPLICATED COUNT BY ETHNICITY**

	(A) TOTAL NOT Hispanic or Latino	(B) TOTAL Hispanic or Latino	(C) Ethnicity Not Reported	<u>HISPANIC OR LATINO</u> (Sub-categories by country or area of origin)				
				(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South America n	(B.5) Other and Unknown
TOTAL DELIVERIES IN STATE								
TITLE V SERVED								
ELIGIBLE FOR TITLE XIX								
TOTAL INFANTS IN STATE								
TITLE V SERVED								

ELIGIBLE FOR TITLE XIX								
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**INSTRUCTIONS FOR THE COMPLETION OF FORM 8  
DELIVERIES AND INFANTS SERVED BY TITLE V  
AND ENTITLED TO BENEFITS UNDER TITLE XIX**

**Title V citation:** Section 506 (a)(2)(C-D) requires each State to submit an annual report on its activities under Title V. Included in this requirement is the following:

- (C) "Information (by racial and ethnic group) on--
  - (i) the number of deliveries in the State in the year, and
  - (ii) the number of such deliveries to pregnant women who were provided prenatal, delivery, or postpartum care under this title or were entitled to benefits with respect to such deliveries under the State plan under title XIX in the year.
- (D) Information (by racial and ethnic group) on--
  - (i) the number of infants under one year of age who were in the State in the year, and
  - (ii) the number of such infants who were provided services under this title or were entitled to benefits under the State plan under title XIX at any time during the year."

**Instructions:**

A glossary of terms applicable to this form is presented in Section 10.1 of this document.

At the top of the form, on the line "Reporting Year," enter the year for which the data applies. The same "Reporting Year" is to be used for both parts I and II of this form.

Complete all required data cells. If an actual number is not available, make an estimate. Please explain all estimates in a footnote.

**Section I:**

"Total Deliveries in State" - In column A enter the number for the population-based total of all deliveries in the State for the reporting year eligible for Title XIX who were provided delivery of services in the reporting year. For columns B-H enter the number of individuals who were eligible by race. In column A, for "Total infants in State," enter the number of infants who were eligible for Title XIX during the reporting year. (Please note that this figure is related to the "Total Births by Occurrence" line in Form 6, and the "Total infants < 1 year of age" row in Form 7. While these figures are not expected to match, they should show a fairly close relationship to each other). For columns B-H enter the number of infants who were eligible by race.

**Section II**

States without a significant Hispanic or Latino population should report only Hispanic or Latino, Not Hispanic or Latino, or Ethnicity Not Reported categories in columns A through C. States with a significant Hispanic or Latino population are encouraged to report subcategories by country or area of origin in columns B.1 through B.5. If these columns are used, the total of the populations reported in those columns must equal the population figure in column B.

There will be overlap between the figures listed for "Title V Served" and "Eligible for Title XIX," because this form asks for all individuals served by Title V and an estimate of all those in the State eligible for Title XIX. The form does not ask for a report on those served by Title V who are also eligible for Title XIX.

